

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

FC:2501				or <u>Fax</u>	(703) 746-4000		
CURRENT CORRESCIONENCE ADDRESS from: Use Block 1 for any change of address)  7590  Atthur Jacob  25 East Salern Street P.O. Box 866  Hackensock, N J 07601  APPLACATION NO.  APPLACATION NO.  FILING DATE  PROTRAMED INVENTION: INTRAMEDULLARY NAIL BASED BONE FRACTURE TREATMENT  APPLACATION INTRAMEDULLARY NAIL BASED BONE FRACTURE TREATMENT  APPLACIATION NO.  APPLACATION NO.  APPLACATION NO.  APPLACATION NO.  APPLACATION NO.  FUND DATE  APPLACATION NO.  APPLACATION N	INSTRUCTIONS: This for appropriate. All further cor indicated unless corrected to maintenance fee notification.	m should be used for transespondence including the below or directed otherwise	smitting the ISSU Patent, advance order in Block I, by (a)	E FEE and PUBL ders and notificatio specifying n	CATION FEE (if re n of maintenance fee correspondence addre	quired). Blocks I through 5 s s will be mailed to the current ss; and/or (b) indicating a sep-	hould be completed where correspondence address as arate "FEE ADDRESS" for
ATTILIT JECOD  25 Eats Salerm Street P.O. Box 686 Hackenssek, NJ 07601 Hackenssek, NJ 07601  Arbitation of Programment of the Control of the	CURRENT CORRESPONDENCE	E ADDRESS (Note: Use Block 1 for	any change of address)	UIN 0 9 20	Note: A certificate Feels) Transmittal. palets. Each additions are its own certification.	of mailing can only be used f This certificate cannot be used onal paper, such as an assignment cate of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must
APPLICATION NO.   FILING DATE   FIRST NAMED INVENTOR   ATTORNEY DOCKET NO.   CONFIRMATION NO.   10697,227   10302003   Alfred F. Behrens   A-02.37   1958	25 East Salem Stree P.O. Box 686		1	TRADEM!	Latereby certify that States Postal Service didressed to the Market to the U	Certificate of Malling or Trans this Fee(s) Transmittal is bein e with sufficient postage for fin fail Stop ISSUE FEE address SPTO (703) 746-4000, on the	smission  g deposited with the United  st class mail in an envelope  above, or being facsimile  date indicated below.
Compared to the property of the form of the form is not assigned that will appear on the patent. If an assignee is identified below, the document has been filed if recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.    Appl. NAME OF ASSIGNEE   PLEASE NOTE: Unless an assignee category or categories (will not be printed on the patent):   Individual   Corporation or other private group epity   Government at The Orlowing fee(s) are enclosed:   Appl. NAME OF ASSIGNEE   Appl. LENTITY status. See 37 CFR 1.27.   B. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27.   B. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27.   B. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27.   Date	40 /2005 MRERHET 00000138 10697227				Arthur J	Arthur Jacob (Depositor's name	
APPLICATION NO.   FILING DATE   FIRST NAMED INVENTOR   ATTORNEY DOCKET NO.   CONFIRMATION NO.   10/697,227   10/30/2003   Alfred F. Behrens   A-02.37   1958    TITLE OF INVENTION: INTRAMEDULLARY NAIL-BASED BONE FRACTURE TREATMENT  APPLN. TYPE   SMALL ENTITY   ISSUE FEE   PUBLICATION FEE   TOTAL FEE(s) DUE   DATE DUE   nonprovisional   YES   \$700   \$300   \$1000   07/06/2005    EXAMINER   ART UNIT   CLASS-SUBCLASS   COMMISTOCK, DAVID C   3732   606-064000    1. Change of correspondence address or indication of "Fee Address" and indication form   FIOSBAY 220 attached.   1970 Change of correspondence address for change of Correspondence Address form FIOSBAY 220 attached.   1970 Change of correspondence address for the STORY Address from FIOSBAY 220 attached.   1970 Change of correspondence address for the TOSBAY 220 attached.   1970 Change of Correspondence address for Change of Corresponde	7ስለ ስስ በD				gue	wixant	(Signature)
10/697,227	FC:2501 FC:1504	C:2501 C:1504				105	(Date)
APPIN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE  nonprovisional YES \$ \$700 \$ \$300 \$ \$1000 \$ 07/06/2005  EXAMINER ART UNIT CLASS-SUBCLASS  COMSTOCK, DAVID C 3732 606-064000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).    Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).    Tee Address of indication (or "Fee Address" Indication form PTOS/B1/2) attached.    "Fee Address" indication (or "Fee Address" Indication form PTOS/B1/2) attached.    Tee Address of indication (or "Fee Address" Indication form PTOS/B1/2) attached.    A SSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED DN THE PATENT (print or type) 1 sisted, no same will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED DN THE PATENT (print or type) 1 sisted, no same will be printed.  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual   Corporation or other private group entity   Government of Possible Para Phylogological Para Phyl		FILING DATE	1	FIRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE  nonprovisional YES \$700 \$300 \$1000 07/06/2005  EXAMINER ART UNIT CLASS-SUBCLASS  COMSTOCK, DAVID C 3732 606-064000  1. Change of correspondence address or indication of "Fee Address" (37 CFR. 1,53).  Change of correspondence address (or Change of Correspondence Address from F10-389 122) attacked.    "Fee Address from F10-389 122) attacked.   "Fee Address indication (or "Fee Address" Indication form F10-389 124) attacked. Use of a Customer P10-389 124, required.   "Fee Address indication (or "Fee Address" Indication form F10-389 124) attacked. Use of a Customer P10-389 124, required.   "Fee Address indication of "Fee Address" Indication form F10-389 124, required.   "The State of P10-389 124 attacked. Use of a Customer P10-389 124, required.   "The F10-389 124 attacked. Use of a Customer P10-389 124, required.   "The F10-389 124 attacked. Use of a Customer P10-389 124, required. In the patch. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.   "The F10-389 124 attacked. Use of P10-389	10/697,227	10/30/2003		Alfred F. Behre	ns	A-02.37	1958
COMSTOCK, DAVID C  3732 666-064000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. CFR 1.363). CFR 2.40ress' indication for "Fee Address" Indication form PTO/SB/147; Rev 0.3-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the fee(s) are enclosed:  A check in the amount of the fee(s) is enclosed.  Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized of the application identified above.  A check in one amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Date Corporation or other private group entity of the form).  5. Change in Entity Status (from status indicated above)  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Date Corporation or other private distinct of the Sprio.  Certain and the amount of the fee(s) is enclosed.  Da	nonprovisional	YES	L				<u> </u>
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).     Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.     "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required.     3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)     PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.     (A) NAME OF ASSIGNEE	EXAMINER		ART UN	it (	CLASS-SUBCLASS		
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Use of a Customer Number is required.  Corporation of the co	COMSTOCK, DAVID C		3732		606-064000		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the feels):  A the following fee(s) are enclosed:  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized that the feels of the patent, in payment by credit card. Form PTO-2038 is attached.  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Date  Date  Typed or printed name  Arthur Jacob  Registration No. 19,702	Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
4b. Payment of Fee(s):    Sale   Fee	PLEASE NOTE: Unless recordation as set forth in	an assignee is identified b 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will appear on Γa substitute for fili	the patent. If an ass ng an assignment. TY and STATE OR C	COUNTRY)	
Sample   S					<del></del>	Corporation or other private gr	
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  The Director is hereby authorized to thank the peposit Account Number 502221 thank the precatiful feet), of Copies with form).  5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Authorized Signature  Arthur Jacob  Registration No. 19,702	10. Laymon of 1 co(s).						
Advance Order - # of Copies							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Date  Date  Registration No. 19,702							GGiSany overpayment, to copy of this form).
Authorized Signature	a. Applicant claims SI	MALL ENTITY status. See	37 CFR 1.27.				
Typed or printed name Arthur Jacob Registration No. 19,702	The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Iss ublication Fee (if required) ords of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	ion Fee (if any) or t I from anyone other Office.	o re-apply any previo than the applicant; a r	usly paid issue fee to the applic registered attorney or agent; or t	ation identified above. he assignee or other party in
	Authorized Signature	Juthur	arol	<del>-</del>	Date	JUNE 6, 2	005

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.